VIRGINIA DEQ REGISTRATION STATEMENT GENERAL VPDES PERMIT FOR DOMESTIC SEWAGE DISCHARGES OF LESS THAN OR EQUAL TO 1,000 GALLONS PER DAY

Please Type or Print All Information

1.	Name of Facility/Residence CRAIG MILLS RESIDENCE, INDIAN RIDGE SUBDIVISION (LOT 24)								
	Address of Facility	1045 INDIAN CREEK ROAD	CHESAPEAKE	VIRGINIA	23322				
	· .	Street	City	State	Zip				
2.	Facility owner(s)	MILLS	CRAIGS		w				
	_	Last Name	First Name		M.I.				
		MILLS	SANDRA		S				
		Last Name	First Name		M.I.				
	Address of Owner	SAME AS ABOVE							
	•	Street	City	State	Zip				
	Phone Number(s)	(757) 482-4307	(757)	724-2963 (cell)					
		Home	Work						
	Is or will the owner	be the occupant of the facility? Y	es No 🗌						
3.	Name of water body	receiving the discharge DITC	H TO NORTHWEST	RIVER					
	Is the discharge poin	nt on a stream that usually flows dur	ing dry weather? Yes	⊠ No □	_				
4.	Amount of discharg	e (gallons per day) on a monthly ave	erage 310 GPD						
5.	Are any pollutants of	Are any pollutants other than domestic sewage to be discharged? Yes No							
	If yes, please explai	n							
6.	How will the discharge be disinfected? Chlorination Ultraviolet Radiation Other								
7.	Is there another discharge point covered by a VPDES permit located within 500 feet of the discharge point								
	identified in this Registration Statement? Ves No No								
8.	Are central sewage facilities available to this facility? Yes \square No \boxtimes \bigwedge RECEIVED — DEC								
9.	Are central sewage facilities available to this facility? Yes No								
	If yes, please provide permit number								
	Has the facility been	n built and begun to discharge? Ye	es 🗌 No 🔀		ater Regional Office				
10.	10. The owner of any proposed treatment works or any treatment works which has not previously been issued valid VPDES permit must submit the following attachments with this registration statement:								
a. A topographic map which indicates the discharge point, the location of the property to be served by the treatment works, and the location of any wells, springs, and other water bodies, or downstream reside within ½ mile downstream from the discharge;									
	location of the f	of the existing or proposed sewage t facility/residence to be served, the in ischarge line location; and							
	been applied for	rom the Virginia Department of Hear r and that the Virginia Department of we that parcel of land with an onsite	f Health has determined						
11.	Has a valid maintenance contract been obtained by the owner of any existing treatment works? Yes No								
	If yes, provide the name of the contract provider								
	and the expiration d	ate of the current contract			_				

		If no, has an exception to the maintenance contract been requested and granted in accordance with Section 12 below? Yes No							
	Αv	A valid maintenance contract shall provide for the following:							
		The state of the s							
	b.								
	c.	 Results of all t Alarm activati Maintenance, Recommended 	following items will be maintained by the contract provider: of all tests and sampling; activation incidents; nance, corrective, or repair activities performed; mended repair or replacement items; and of all reports prepared by the contract provider.						
	d.	An inspection will that a problem may		contract provider v	vithin 48 hours after r	notification by the owner			
	e.	e. A minimum of twenty-four months of consecutive coverage under the maintenance contract.							
12.	. The owner of any existing treatment works may request an exception to the maintenance contract require submitting an Operation and Maintenance Plan to the DEQ for review and approval. Has an Operation a Maintenance Plan been approved by the DEQ previously? Yes No								
	If y	es, provide the date	of approval of the C	peration and Maint	enance Plan				
Have any changes been made to the Operation and Maintenance Plan? Yes No									
	If y	es, explain the chan	ges						
	At a	a minimum, the Ope	eration and Maintena	nce Plan shall cont	ain the following info	rmation:			
	a.	An up-to-date Ope	ration and Maintena	nce Manual for the	treatment works;				
	b.	 The date and a If dechlorinati The date and t 	amount of disinfection on is used, the date a	on chemicals added and amount of any cilure(s) and the date	lechlorination chemic and time the equipm	-			
	c.	Dated receipts for	chemicals purchased	, equipment purcha	sed, and maintenance	performed; and			
	d.		oring plan in accorda on, preservation, and			110-80 Part I A, including			
13.	Certification: "I hereby grant to duly authorized agents of the Department of Environmental Quality, upon presentation of credentials, permission to enter the property where the treatment works is located for the purpose of determining compliance with or the suitability of coverage under the General Permit. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."								
	Sig	mature(s):	gru	9	Date:	10-28-11			
					Date:				
For	r De	partment of Enviro	onmental Quality U	se Only					
Accepted/Not Accepted by: Date:									
Basin Subbasin				Stream Class	Section				
Spe	Special Standards								
	006)								

300 George Washington Highway N. Chesapeake, Virginia 23323

757/487-4535 FAX-487-9788

John G. Horton, L.S. J. Gregory Dodd, M.E., P.E.

October 28, 2011

Ms. Melinda Woodruff DEQ - Virginia Beach Office 5636 Southern Boulevard Virginia Beach, VA 23462

RE: Alternative Discharge Repair - LOT 2A-1 - 1045 Indian Creek Road

Dear Ms. Woodruff:

Enclosed please find the following transmitted for your review.

- One (1) set of (2 sheets per set) of above referenced project.
- One (1)copy of utility improvement calculations
- One (1) Virginia DEQ Registration Statement.

The existing single dwelling located at 1045 Indian Creek Road, Chesapeake Virginia. The existing house has its own septic system and drainage field to treat the domestic sewage onsite. The sewage treatment is provided by an Orenco-Advantex-AX20 prior to effluent discharge to the existing drainfield. The drainfield failed as evidenced by water coming out of the ground from the drainfield flowing across the driveway of the residence. We attempted to resolve the problem by adjusting the dosing rate to the drainfield, but the system still fails. Our proposed solution with this plan submittal is proposed the direct discharge from the sewage treatment system with additional UV disinfection. Please review the enclosed and if you have any question/comment, please contact me (or Mr. Greg Dodd of this office). Thank you.

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OCT 3 1 2011

Tidewater Regional Office

Sincerely, Horton & Dodd. P.C.

Quin. Tran, EIT Project Engineer atran@hdpc.net